

SERIAL NUMBER 09/399,109	FILING DATE 09/20/99	CLASS 370	GROUP ART UNIT 2731	ATTORNEY DOCKET NO.
-----------------------------	-------------------------	--------------	------------------------	---------------------

APPLICANT	ZION HADAD, RISHON LEZION, ISRAEL.
	<b>**CONTINUING DOMESTIC DATA*****</b> VERIFIED <u>None</u> 00
	<b>**371 (NAT'L STAGE) DATA*****</b> VERIFIED <u>None</u> 00
	<b>**FOREIGN APPLICATIONS*****</b> VERIFIED <u>None</u> 00

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 10/07/99 \*\* SMALL ENTITY \*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Initials <u>DD</u> Initials _____	STATE OR COUNTRY ILX	SHEETS DRAWING 20	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
--	---	-------------------------	----------------------	--------------------	-------------------------

ADDRESS	ZION HADAD 48 HAALMOGIM ST RISHON LEZION ISRAEL	AIR MAIL
---------	--	----------

TITLE	BI-DIRECTIONAL COMMUNICATION CHANNEL
-------	--------------------------------------

FILING FEE RECEIVED \$380	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
------------------------------	---	---